24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 1 OF 1 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Women Vote!	
	C C00473918
Check if 24-hour report X 48-hour report New report Amends report filed	i on Man / Dad / Yayayay
Full Name of Payee	Date of Public Distribution/Dissemination
The Strategy Group, Inc	03 29 7 2016
Mailing Address 703 N Franklin	Amount
Suite 404	
City State Zip Code	20966.87
Chicago IL 60654-7205	Transaction ID: VN7A7A0ZTY3 Date of Disbursement or Obligation
Purpose of Expenditure Mailhouse Category/ Type 004	M = M / D = D / Y = Y = Y
Name of Federal Candidate Support Office	e Sought: X House District: 08
Kathleen Matthews Oppose	President Senate State: MD
Calendar Year-To-Date Per Election for Office Sought Disbut	ursement For:
Full Name of Payee	Date of Public Distribution/Dissemination
Mailing Address	
Walling / Addices	Amount
City State Zip Code	
Purpose of Expenditure	Date of Disbursement or Obligation
Category/ Type	M = M / D = D / Y = Y = Y
Name of Federal Candidate Support Offic	e Sought: House District:
Oppose	President Senate State:
Calendar Year-To-Date Disb	ursement For: Primary General
Per Election for Office Sought	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	20966.87
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	20966.87
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
	03 28 2016
Signature	